

The Triangular Bandage

(The Application of the Triangular Bandage shown by words and diagrams)

BY

HOWARD M. PRESTON

*Demonstrator of the Practical Classes at the Polytechnic, Regent Street, in
connection with the St. John Ambulance Association and
the British Red Cross Society.*

WITH AN INTRODUCTION BY

JAMES CANTLIE, M.A., M.B., F.R.C.S.

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THIS BOOK IS DEDICATED
TO
JAMES CANTLIE, Esq., F.R.C.S.,
WITH THE
AUTHOR'S THANKS FOR THE KINDNESS AND
ASSISTANCE HE HAS SHOWN HIM
IN HIS WORK.

FOREWORD.

It is with some diffidence that I have produced this little book, because there are at present so many very excellent ambulance books procurable.

As the result of considerable experience, however, I venture to think that the need for a small work dealing exclusively with bandaging as apart altogether from first aid is apparent.

The book does not profess to teach first aid but only to amplify and to make more clear what is dealt with, in a necessarily more curtailed fashion, in the ordinary ambulance text-books.

If the book proves of real assistance to students of ambulance, or for reference, my object shall be fully attained.

My thanks are due to Mr. James Cantlie, F.R.C.S., for his sympathetic help and to many of the numerous students I have had the honour of instructing at the Polytechnic, Regent Street, who in many ways have rendered me real assistance.

HOWARD M. PRESTON.

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INTRODUCTION.

MR. HOWARD M. PRESTON has been associated with me in the practical teaching of First Aid and Home Nursing Classes at the Polytechnic, Regent Street, London, W., for seven years.

His knowledge of the application of the Triangular and Roller bandaging is thorough and complete. He is moreover endowed with the rare gift of teaching and of the management of large classes requiring instruction in practical ambulance work.

Readers of his manual of bandaging will find the text clear and precise and can have no difficulty in following his lucid descriptions.

JAMES CANTLIE.

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The Triangular Bandage.

BANDAGING.

THE triangular bandage is always used in first aid. To make two triangular bandages take a piece of calico 40 in. square, and cut it in half from corner to corner (see illustration fig. 1).

OVERFOI

The triangular bandage has one *point*, two *sides*, two *ends*, and one *base* (see fig. 2).

Before commencing to bandage, the student must first learn how to fold a bandage.

A bandage can be folded in three different ways:

(1) The broad fold bandage is made by bringing the *point* of the bandage down to the *base* (see fig. 3) and then folding the bandage over again (see fig. 4).

(2) The narrow fold bandage is made by folding the broad fold bandage over again (see fig. 5).

(3) The medium fold bandage is made by bringing the *point* of the bandage down to the *base* (see fig. 3) and then folding the bandage over twice more (see fig. 6).

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When not in use the triangular bandage must be folded narrow, the ends brought to the centre of the bandage, and then folded into four.

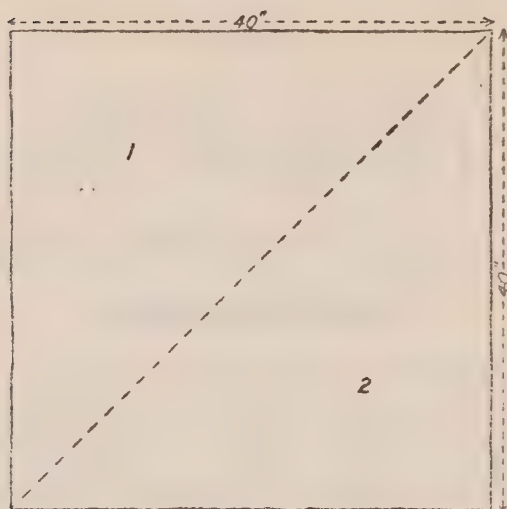


FIG. 1.

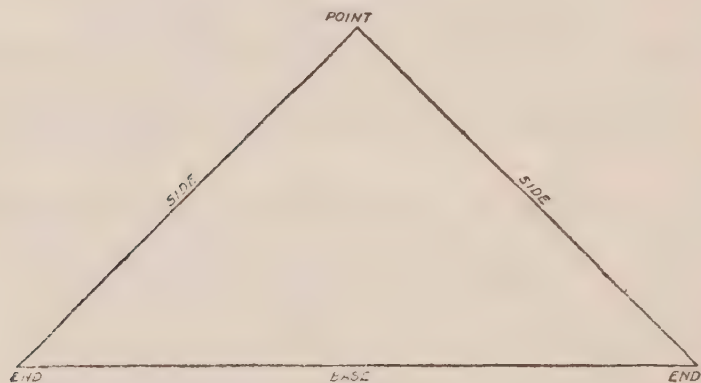


FIG. 2.

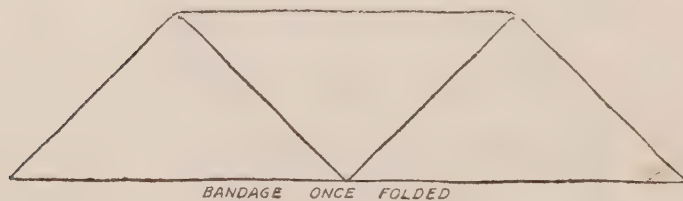


FIG.

I want the student to fully understand that in triangular bandaging you must always stand in front of the part of the patient to be bandaged.

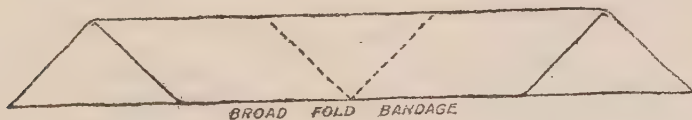


FIG. 4.

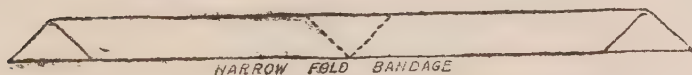


FIG. 5.

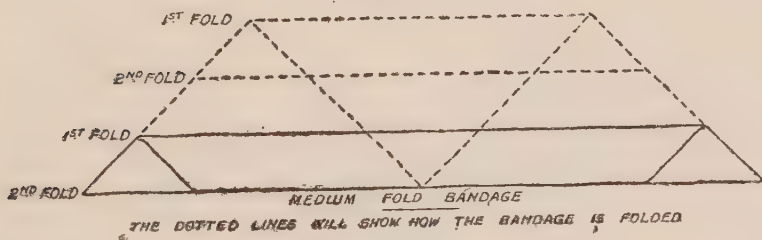


FIG. 6.

Knots.

There is only one knot to be learnt in connection with triangular bandaging, and that is the *reef knot*.

To tie a reef knot take a narrow fold bandage in your hands. Now take the *end* of the bandage that is in your *left hand* and place it over the *end* that is in your *right hand* (see fig. 7), then tuck the *end* through the loop made

and pull, this makes a half knot (see fig. 8). Now take the *end* that is in your *right hand* and place it over the *left-handed end* and tuck it

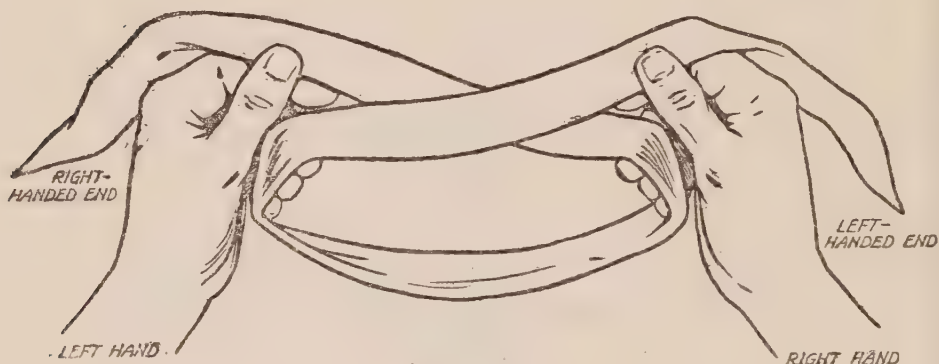


FIG. 7.

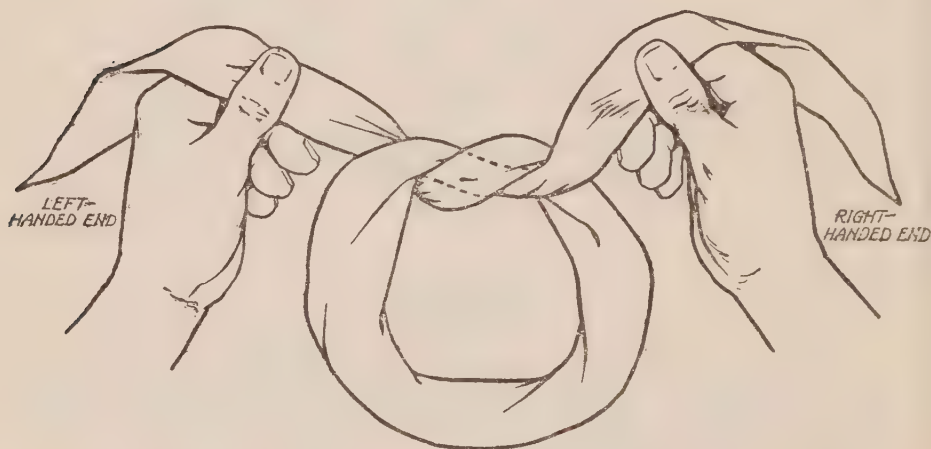


FIG. 8.

through the loop made and pull, this completes the *reef knot* (see fig. 9).

The *reef knot* should always be placed in a

position that is most comfortable to the patient, and the *ends* of the bandage *must always* be tucked out of sight when the knot is completed. You will notice this as you advance with your bandaging.

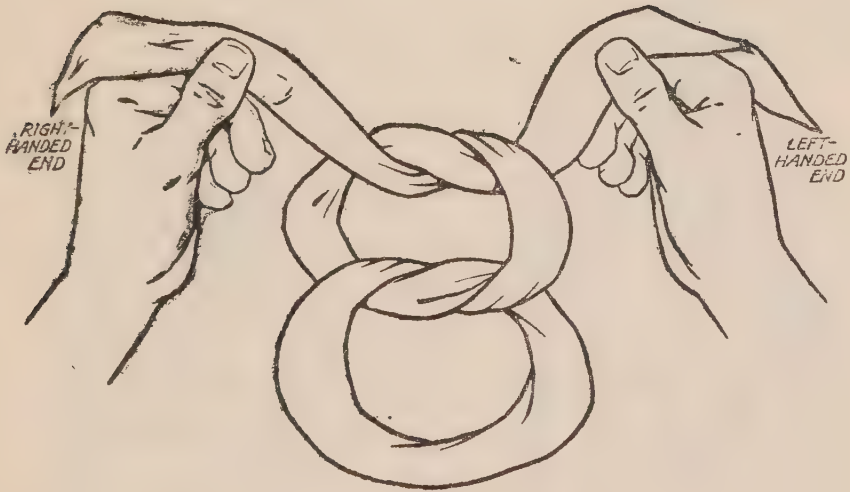


FIG. 9.

Slings

Before learning any more about bandaging the student must be taught how to put on slings.

Slings are used as a support to the injured limbs, and also as a source of comfort to the patient.

You must always study the patient's feelings when putting on a sling.

Large Arm Sling.

This sling is chiefly used to support injuries to the hand, forearm, and sometimes the elbow.

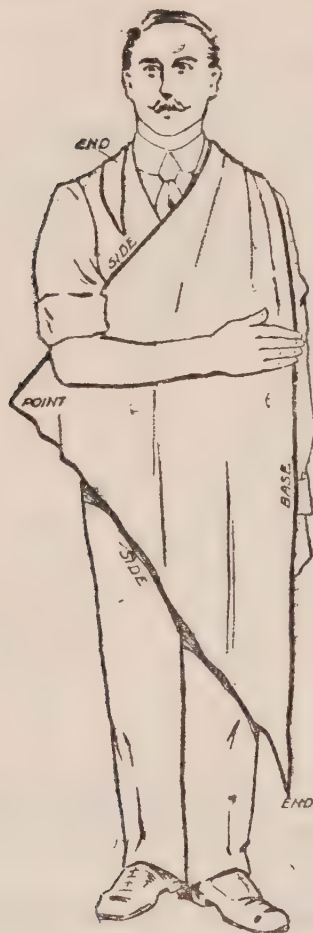


FIG. 10.



FIG. 11.

Take a triangular bandage and lay it across the patient's chest, taking great care that the *point* of the bandage goes underneath the

elbow on the injured side, now bring up the *end* of the bandage that is nearest the ceiling and carry it over the shoulder of the uninjured side, round the back of the neck and allow about 4 to 6 inches of the *end* of the bandage to rest on the shoulder of the injured side

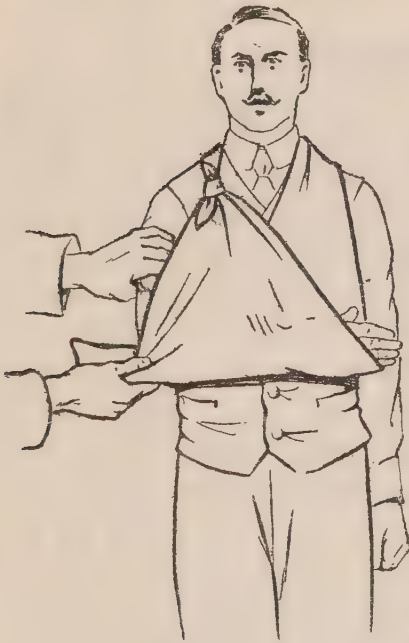


FIG. 12.

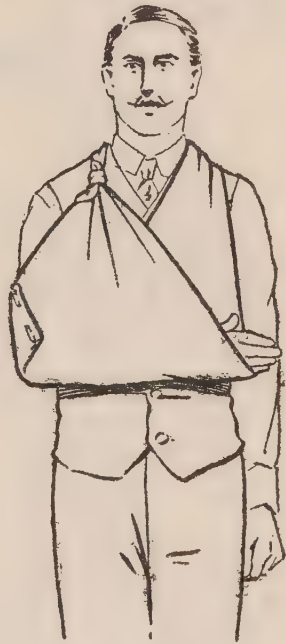


FIG. 13.

Now lay the hand and forearm gently across the chest so that the hand is the *least bit* (1 to 2 inches) above the level of the elbow (see fig. 10), then bring the other end, that is the end nearest the ground, up over the injured limb, and tie off both *ends* in a *reef knot* in the hollow of the shoulder on the injured side (see fig. 11). To make the sling look neat and tidy, take the arm on the injured side

in one hand and pull the *point* of the bandage along with the other hand until the bandage is quite tight (see fig. 12), making quite sure that only the finger nails of the hand are showing out of the sling, then bring the *point* of the bandage over the elbow and pin off with one or two safety pins, so finishing the sling (see fig. 13).

Small Arm Sling.

This sling is chiefly used in the case of an injury to the arm and shoulder.

Take a broad fold bandage and place it across the chest so that the lower end inclines towards the elbow on the injured side (see fig. 14), then carry the upper end over the shoulder on the uninjured side, round the back of the neck and allow about 6 inches of the end to hang on the injured side in the hollow of the shoulder (see fig. 15). Now place the hand and forearm across the chest so that the hand is about 2 inches above the level of the elbow, bring up the lower end of the bandage over the hand and wrist, then tie it to the upper end in a reef knot in

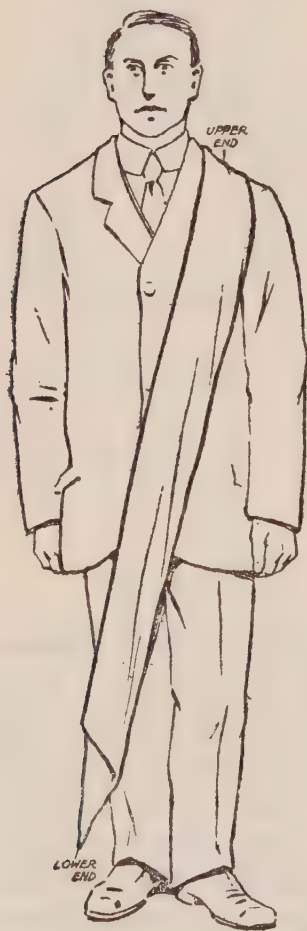


FIG. 14.

the hollow of the shoulder (see fig. 16) The sling should reach from the middle of the first finger (phalanx) bone of the little finger to 3

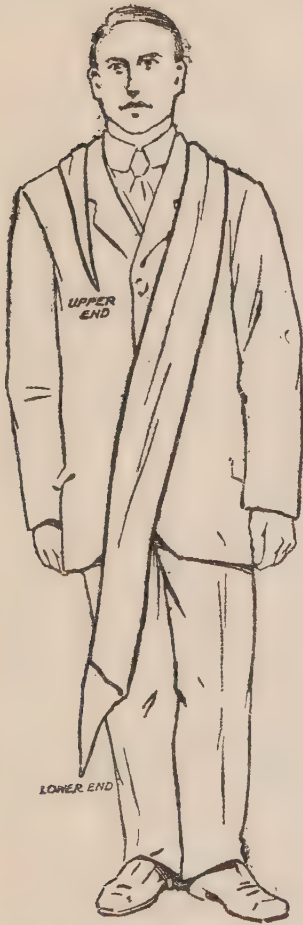


FIG. 15.

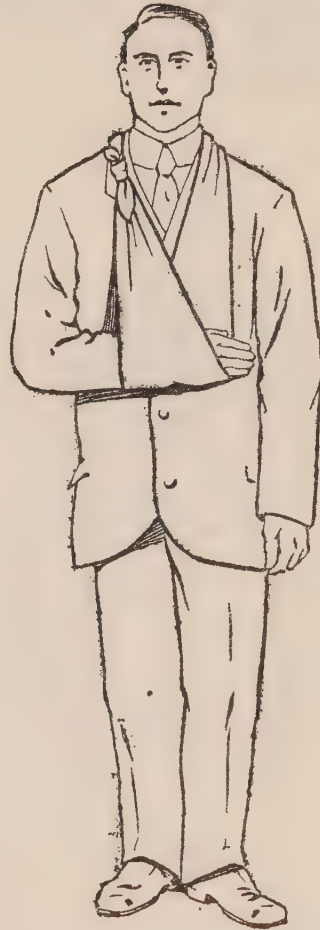


FIG. 16.

inches above the wrist, so that it supports the lower 2 inches of the inner line of the forearm (the ulna) (fig. 16).

St. John Arm Sling.

The following are the injuries with which this sling is principally used : fractures of the collar bone, shoulder blades, and hæmorrhage to the palm of the hand, the wrist, and the forearm.

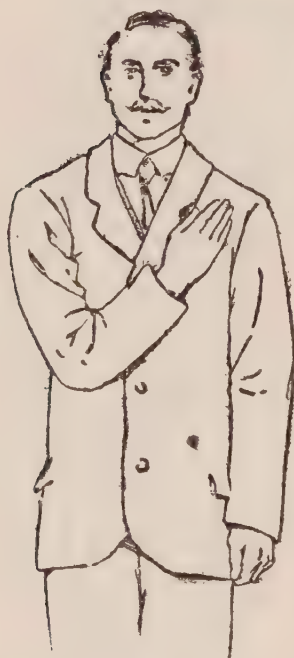


FIG. 17.

Place the hand and forearm across the chest so that the hand almost touches the opposite shoulder (see fig. 17), then take a triangular bandage and place it across the chest, covering hand and forearm with the point of the bandage resting over the flexed elbow. Now the upper end of the bandage is taken up over the hand and allowed to rest on the uninjured shoulder (see fig. 18), tuck the base of the bandage underneath the hand leaving the little finger nail showing, and gradually draw it down the forearm until it reaches

the elbow, then draw the lower end of the bandage underneath the elbow and take it up across the patient's back and over the opposite shoulder, when it can be tied off to the upper end in the hollow of the shoulder on the uninjured side. To finish the sling

bring the point of the bandage over the elbow and secure it with two safety pins as shown in fig. 19.



FIG. 18.

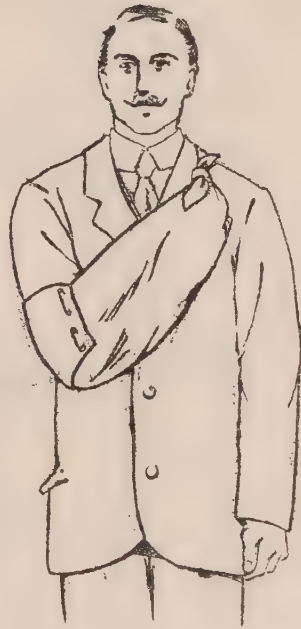


FIG. 19.

This sling is very comfortable and may be applied when the patient cannot move his hand, forearm, or arm.

Special Emergency Slings.

When you have no bandages handy you can improvise slings in the following ways:—

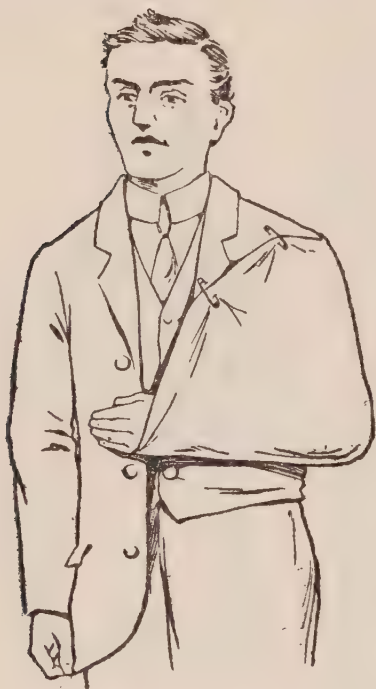


FIG. 20.

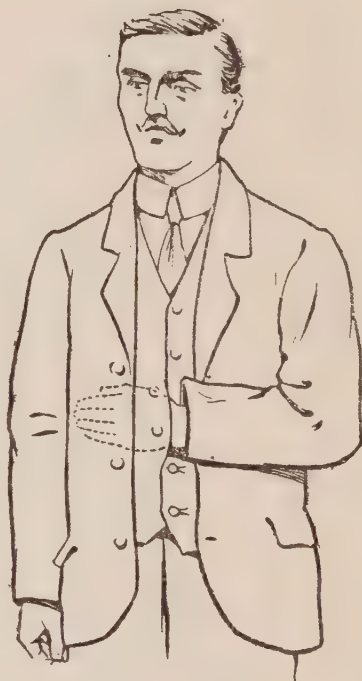


FIG. 21.

(1) Lay the hand and forearm across the chest with the hand just above the level of the elbow, then bring up the bottom of the coat at the front and pin it with two safety pins just above the hand (see fig. 20).

(2) Tuck the patient's hand in between his waist-coat buttons (see fig. 21).

(3) Pin the patient's coat sleeve to his coat with safety pins (see fig. 22).

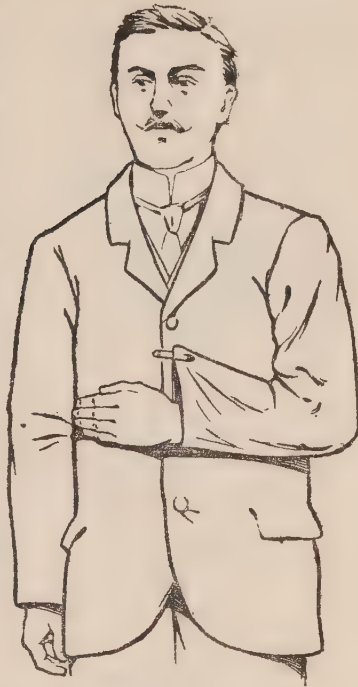


FIG. 22.

DRESSING BANDAGES.

The following methods show how the Triangular Bandage may be applied to keep temporary dressings in position.

The Head (Scalp).

Take a triangular bandage and fold over its base about 2 inches, then place the base of the bandage just above the level of the eyebrows (tucked in edge inwards), so that the point is allowed to drop down behind the back of the neck (see fig. 23); then carry the ends



FIG. 23.

of the bandage round the head taking care that they do not cover the ears, cross them at the back of the neck just above the point, and bring them back again round the head, then tie them off in the centre of the forehead just above the bridge of the nose in a reef knot (see fig. 24). To finish the bandage bring the point up over the back of the head and pin it off with a safety pin (see fig. 25).



FIG. 24.



FIG. 25.

The Shoulder.

Take a triangular bandage, place the point on the top of the injured shoulder well up against the neck, now fold up the base of the

bandage to just above the middle of the arm or to just below the dressing, then carry the ends of the bandage round the arm, cross them

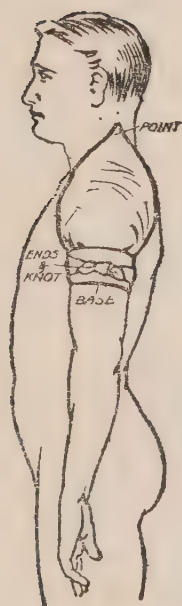


FIG. 26.

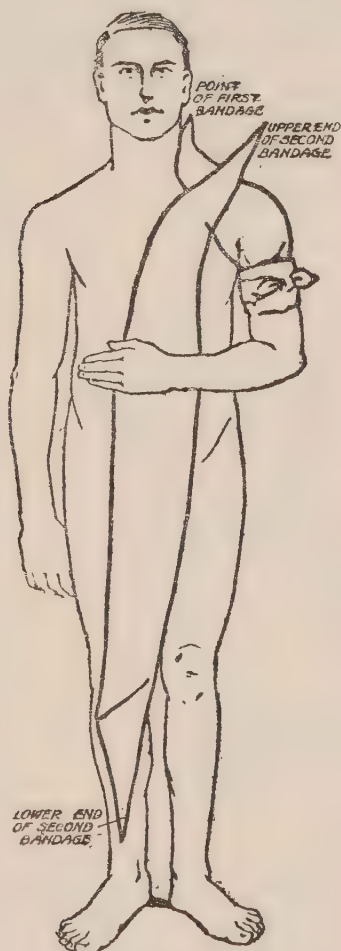


FIG. 27.

underneath the armpit, bring them back again to the front of the arm and tie them off in a reef knot. The ends should encircle the arm

1 inch above the lower border or base of the bandage (see fig. 26). Then apply a small arm sling. This arm sling is put on a little differently to the regular small arm sling. Take a broad fold bandage and place the upper end on the top of the shoulder just under-



FIG. 28.

neath the point of the previous bandage, place the hand and forearm across the chest, the hand should be about 2 inches above the level of the elbow (see fig. 27); now bring the lower end up over the hand and wrist, over the uninjured shoulder, round the back of the neck, and tie it off to the upper end in the hollow of the shoulder in a reef knot (see fig. 28). To finish, gather the ends of the sling together around the

knot and bring the point of the first bandage down over the knot of the second bandage and pin it to the dressing with a safety pin. The dotted lines will show how the point should be pinned. If the injury to the shoulder is very painful the knot of the arm sling can be tied off on the uninjured shoulder.

The Elbow.

Flex (or bend) the patient's elbow, then place the point of a triangular bandage well above the point of the flexed elbow, then fold up turning inwards the base of the bandage to the lower end of the dressing (see fig. 29). Now carry the ends of the bandage round the forearm, cross them on the front of the flexed elbow, carry them up above the elbow and tie them off in a reef knot on the back of

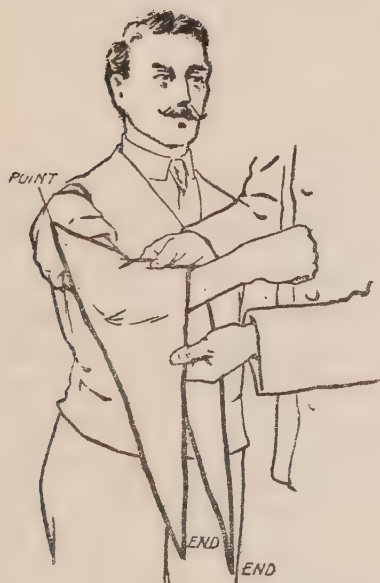


FIG. 29.



FIG. 30.

the arm. Now bring down the point of the bandage over the elbow and pin it off with a safety pin. The dotted line will show where the point should be fastened (see fig. 30).

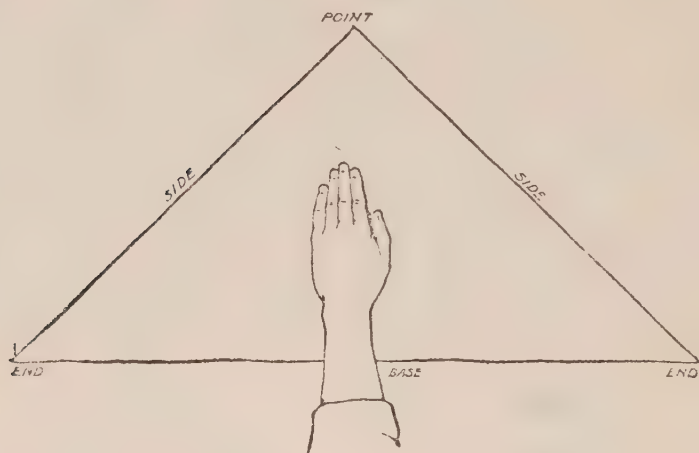
The Hand

FIG. 31.



FIG. 32.

When the fingers are extended the following method is used. Take a triangular bandage and place it upon a table, then fold up the base about 2 inches. Now put the patient's hand in the centre of the bandage so that the extended fingers are in a line with the point (see fig. 31), then carry the point of the bandage up over the fingers and allow it to rest just above the patient's wrist (if the patient is conscious he may hold the point with his other hand), then bring the ends up over the hand and cross them, at the same time carrying them round and round the wrist,

tying them off in a reef knot on the back of the wrist. To finish the bandage pull the point down over the reef knot and pin it off with a safety pin. The dotted lines will show how the point should be fastened (see fig. 32).

The Breast Bone Bandage.

To keep a dressing on the breast bone or the upper part of the chest, take a triangular bandage and make it into a square in the following manner: Take one of the ends of

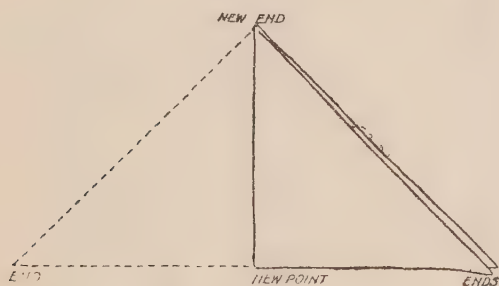


FIG. 33.

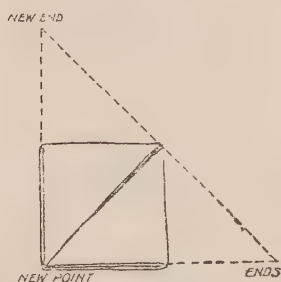


FIG. 34.

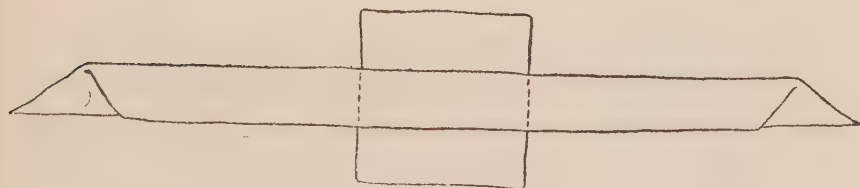


FIG. 35.

the bandage and fold it over to the other end so making a smaller triangular bandage (see fig. 33), then carry the ends of the smaller bandage over to the new point so finishing your square (see fig. 34). The dotted lines in

figs. 33 and 34 will show how the bandage is to be folded. Now take a narrow fold bandage and place it in the centre of your square (see fig. 35), then fold the square over the narrow fold bandage and place it over the breast bone



FIG. 36.



FIG. 37.

(see fig. 36) with the folded border upwards; carry the ends of the narrow bandages over the shoulders, crossing them on the back of the patient, and bring them under the armpits to the front of the chest again, then finish the bandage by pinning the ends to the lower border of your square on the chest (see fig. 37).

Combined Bandage for the Chest and Abdomen.

Lay the base of a triangular bandage across the chest so that the point hangs down towards

the hips (see fig. 38), then carry the ends of the bandage round to the back of the patient and tie them off in a reef knot. Now take another bandage and place the base just over the point

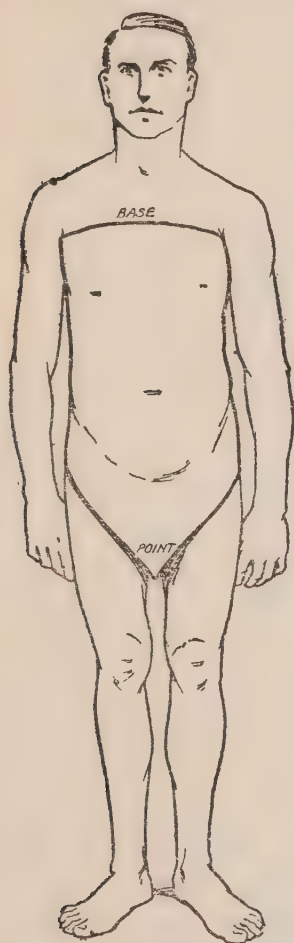


FIG. 38.

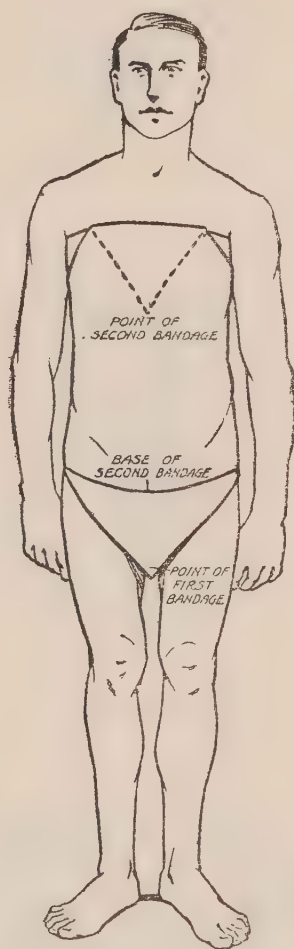


FIG. 39.

of the other bandage above the hips, so that the point of the second bandage is tucked under the base of the first (see fig. 39), carry

the ends round to the back of the patient and tie them off in a reef knot (see fig. 40). To finish this bandage pin the two points up as shown in fig. 41.

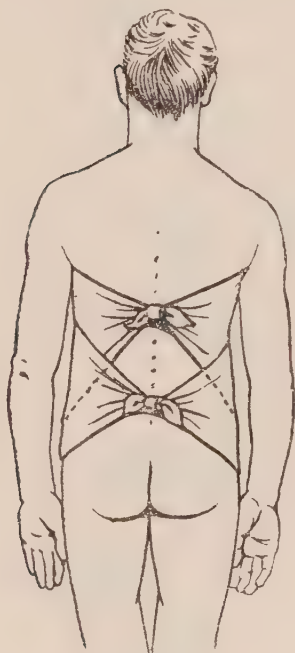


FIG. 40.

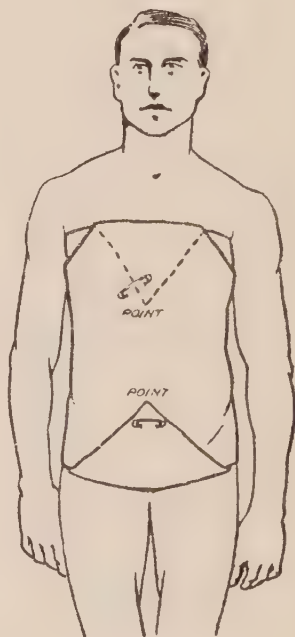


FIG. 41.

The Chest.

Take a triangular bandage and place the point on the shoulder allowing the base to hang down over the chest, carry both ends round the bottom of the chest to the back of the patient and tie them off at the side immediately underneath the point, so leaving one long end (see fig. 42), carry this long end up

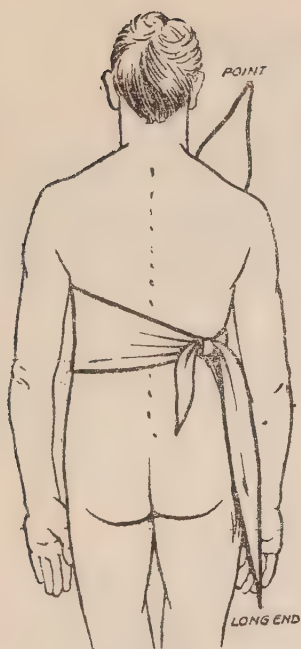


FIG. 42.

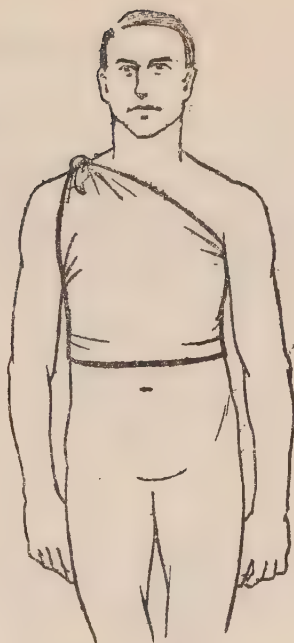


FIG. 43.

over the back and tie it off to the point on the top of the shoulder as shown in fig. 43.

Special Caution.—See that the base of the bandage is brought tightly round the chest, otherwise the dressing will slip.

The Back.

The bandage for the back is applied in the same way as the chest, except that it is begun from the back (see fig. 44).

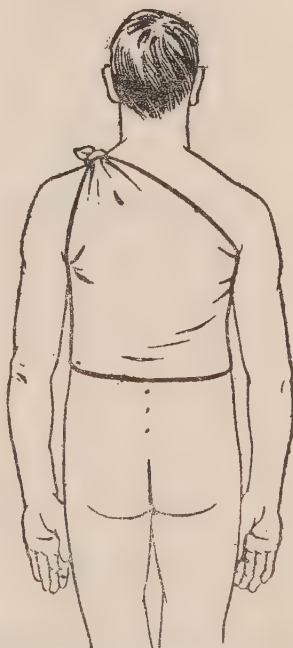


FIG. 44.

The Thigh.

Tie a narrow fold bandage round the body just above the haunch bones, taking care that the knot is tied on the injured side, thus form-



FIG. 45.

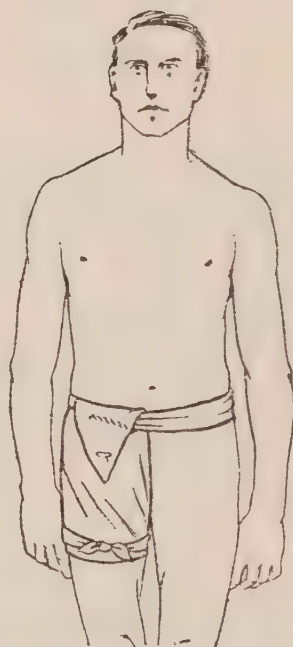


FIG. 46.

ing a belt. Now place the point of another triangular bandage underneath the knot, allowing the base to hang down towards the ground

(see fig. 45), then fold up the base of the bandage until it reaches the lower end of the dressing, carry the ends round the thigh, crossing them behind, bring them once more to the front and tie off in a reef knot on the front of the thigh. To finish the bandage, pull the point of the bandage down over the knot of the belt bandage and pin off with a safety pin (see fig. 46).

The Knee.

Flex (or bend) the knee, then place the point of a triangular bandage above the knee, fold up the base of the bandage to just below the knee, carry the ends round the leg, cross them behind the knee and bring them up above the knee and tie them off in a reef knot (see fig. 47). The point is then brought down over the knee and pinned. The dotted lines will show how the point is to be pinned.

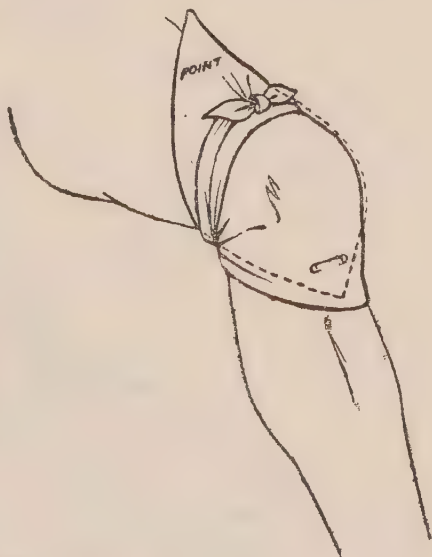


FIG. 47.

The Foot.

Lay a triangular bandage out to its fullest extent, and place the foot in the centre of the

bandage making sure that the toes are in a line with the point (see fig. 48), then bring the

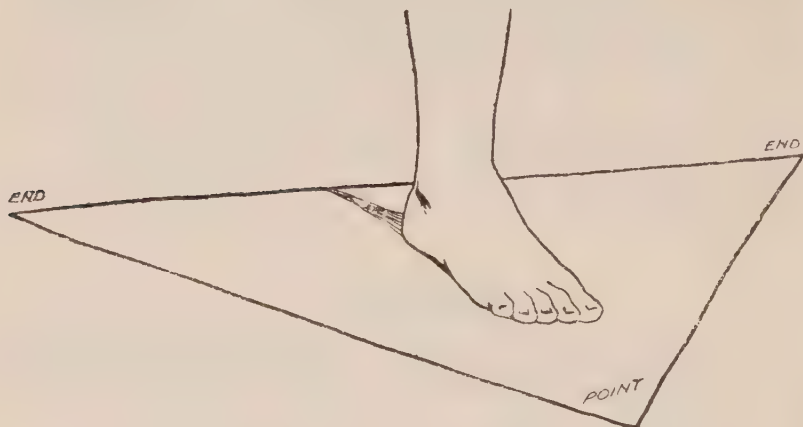


FIG. 48.

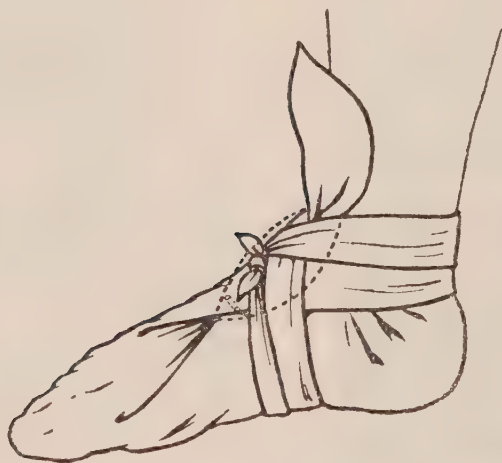


FIG. 49.

point of the bandage up over the foot to the front of the ankle, then carry the ends round the ankle and again to the instep, cross the

ends once more, carry them down over the instep to below the sole of the foot, cross the ends again and bring them up to the top of the instep where they are tied off in a reef knot. To finish the bandage bring the point down over the knot and pin off with a safety pin (see fig. 49). The dotted lines will show how the point should be pinned.

The Heel.

Place the foot in a triangular bandage so that the base is in a line with the centre of the sole of the foot and the point is at the back

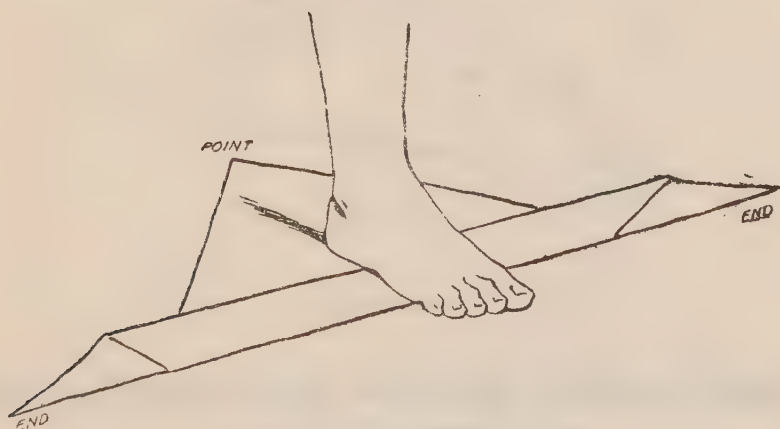


FIG. 50.

of the heel (see fig. 50), now bring up the ends of the bandage and cross them on the instep, carry them round to the back of the ankle, catching in the point of the bandage, cross them once more and bring them round to the front of the instep again and from thence to

the back of the ankle again, where they are tied off in a reef knot (see fig. 51). To finish the bandage bring the point of the bandage down over the knot. The dotted lines will show how the point should be pinned.



FIG. 51.

BANDAGES WHICH ARE USED FOR HÆMORRHAGE.

Cut in the Palm of the Hand.

Place a small pad in the palm of the hand and close the fingers down over it (fig. 52), then take a narrow fold bandage and place the centre of it over the top of the fingers, cross the ends underneath the ball of the thumb (fig. 53), and carry them round and



FIG. 52.

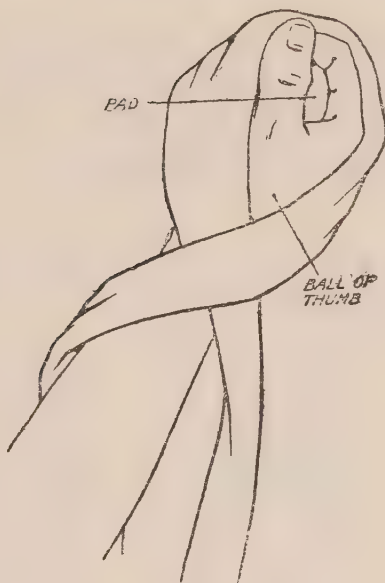


FIG. 53.



FIG. 54.

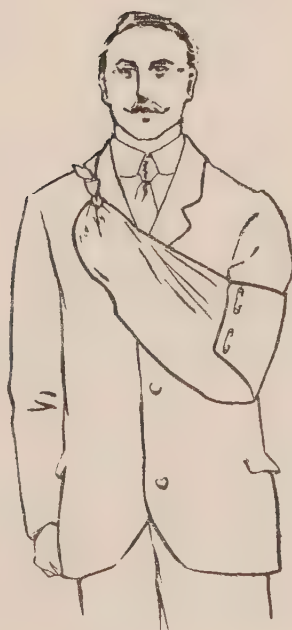


FIG. 55.

round the fingers, leaving the thumb nail showing, tying them off on the thumb (fig. 54). To keep the hand up a St. John sling may be applied (fig. 55).



FIG. 56.

Bandage to Stop the Arteries at the Wrist.

Take a narrow fold bandage and tie two knots in the centre about half an inch apart, then lay the knots on the arteries at the wrist, and carry the ends round and round the wrist tying them off on the knots (fig. 56). A cork cut down the centre will serve the same purpose as the knots.

Bandage for the Artery at the Elbow.

Take a bandage and make a roll pad in the following manner: Make a square of the bandage and fold it over twice so that you have made an oblong, then roll it up as shown in fig. 57. Place the pad in the bend of the elbow. Now take a narrow fold bandage and place the centre of it on the outside of the wrist, cross the ends of the bandage between the forearm and the arm, and carry them underneath the armpit, bring them back again, crossing them once more between the arm and



FIG. 57.



FIG. 58.



FIG. 59.

forearm and then tie them off as tightly as possible on the outside of the wrist (fig. 58). To finish, place a broad fold bandage round the patient's elbow and tie off on the opposite side (see fig. 59).

Bandage to Compress the Artery in the Armpit.

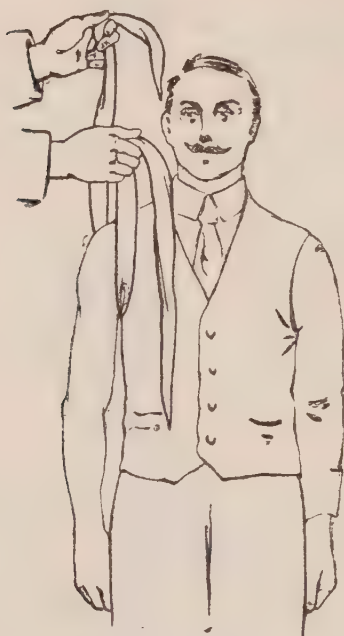


FIG. 60.

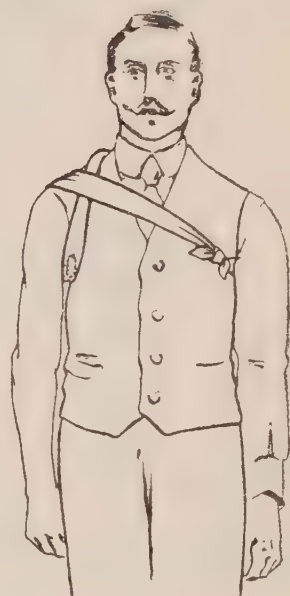


FIG. 61.

Take a roll pad and place it underneath the armpit, then place the centre of a narrow fold bandage over the pad in the armpit, and bring the ends up to the top of the shoulder (fig. 60), then cross the ends and carry one down across

the chest, and the other across the back, tying them both together on the opposite side of the chest (fig. 61). To finish the bandage tie a broad fold bandage round the elbow and catch in the wrist as shown in fig. 62.

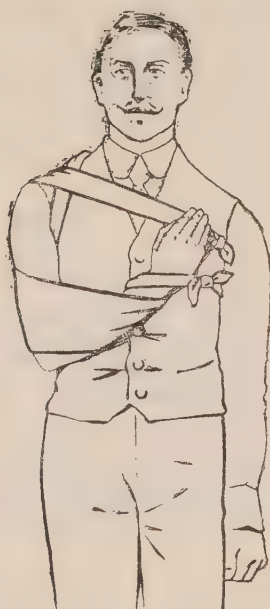


FIG. 62.

How to make a Tourniquet for the Artery in the Arm.

Take a pad or a cork and place it in the centre of the arm underneath the muscle, then put the centre of a narrow fold bandage over the pad, cross the ends to the opposite side of the arm and tie, place a stick over the knot made and tie the ends once more, this time in a reef knot, then twist the stick. Now tie another

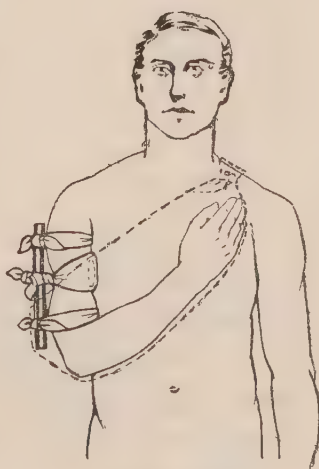


FIG. 63.

bandage over the top of the stick and one over the lower end of the stick as shown in fig. 63 to keep the tourniquet in position. To finish apply a St. John arm sling.

How to make a Ring Pad.

A ring pad is sometimes used for the head. The following method will show how a ring pad may be made. Take a gentleman's pocket handkerchief and fold it like a narrow fold bandage, then tie a half knot in the centre so making a loop (see fig. 64), now simply take up the ends and carry them over the loop and



FIG. 64.

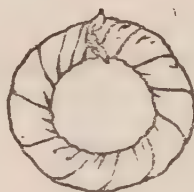


FIG. 65.



FIG. 66.

through the loop until they meet, then tie them off (see fig. 65). This can be applied to the head in various ways. Lay the pad over the wound, then place a narrow fold bandage over the pad and take it round and round the head as shown in fig. 66.

Bandage for a Wound in the Sole of the Foot.

Place a small pad over the wound, then lay a narrow fold bandage over the pad and carry the ends to the front of the instep, cross them and carry them round to the back of the ankle, now cross them once more and bring them round again to the front of the instep, cross them again and take them down over the instep and tie them off on the pad on the sole of the foot as shown in fig. 67.

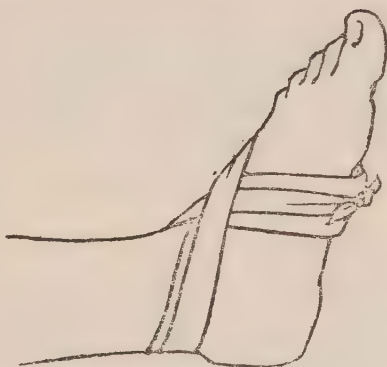


FIG. 67.

Bandage for the Compression of the Arteries at the Ankle.

Place one pad or cork on the plantar artery and one on the dorsal artery, then take a narrow fold bandage round the heel and over the pads, cross the ends on the instep and carry them back again, and if possible tie them off in a reef knot on the pads, as shown in fig. 68.

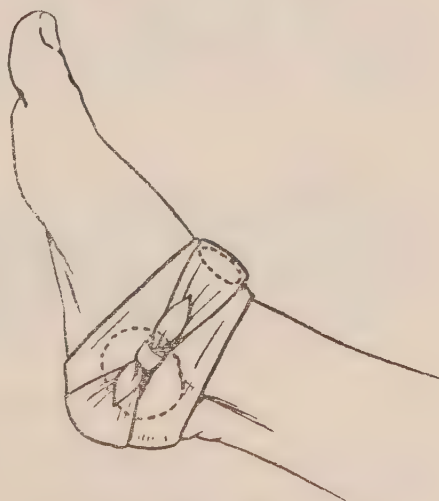


FIG. 68.

Bandage to Stop the Artery Underneath the Knee.

Place a roll pad underneath the knee, then take the centre of a narrow fold bandage and place it over the ankle, bring the ends of the bandage in between the leg and the thigh, cross them and take them right up to the top of the thigh and tie them off as shown in fig. 69.

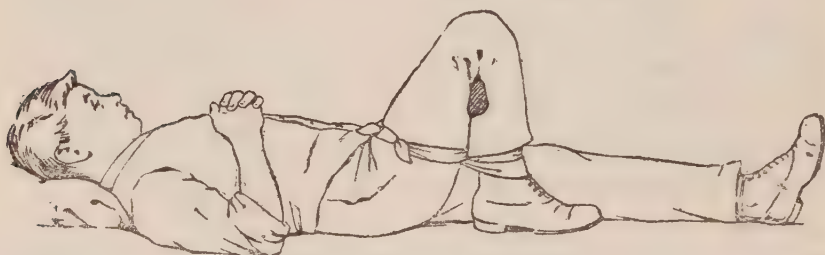


FIG. 69.

How to make a Tourniquet for the Artery in the Thigh.

Place a pad about 3 inches below the femoral artery in the fold of the groin, then place the centre of a narrow fold bandage over the

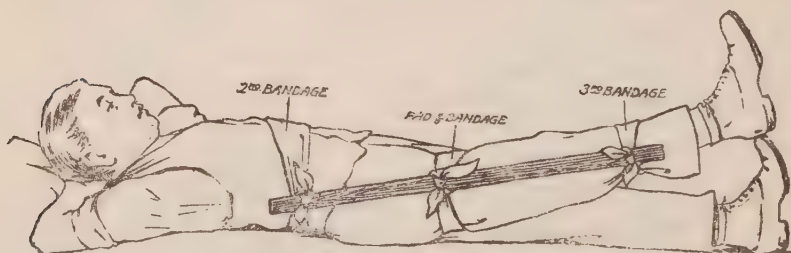


FIG. 70.

pad, carry the ends of the bandage to the outside of the thigh and tie them off in a half

knot, then take a stick and place it over the knot, now tie a reef knot over the stick, then begin to twist the stick. To secure the tourniquet tie one narrow fold bandage over the top of the stick and round the waist, and another narrow fold bandage round the lower part of the stick and the legs, as shown in fig. 70.

Bandage for a Burst Varicose Vein.

Place a clean pad over the wound, then place the centre of a narrow fold bandage over the pad and carry the ends round and round the limb tying them off on the pad. If this is not sufficient tie a narrow fold bandage below the



FIG. 71.

wound, and, if necessary, one above the wound, as shown in fig. 71. Raise the limb by resting it upon a bucket, or box, failing this it may be rested upon the patient's own foot.

BANDAGES WHICH ARE USED IN CONNECTION WITH FRACTURES.

Bandage for a Fractured Lower Jaw.

Place a *narrow fold bandage* underneath the chin, leaving one end shorter than the other (see fig. 72), then take the long end and carry it over the top of the head and allow it to drop over the short end (see fig. 73), bring the short end of the bandage over the long end,

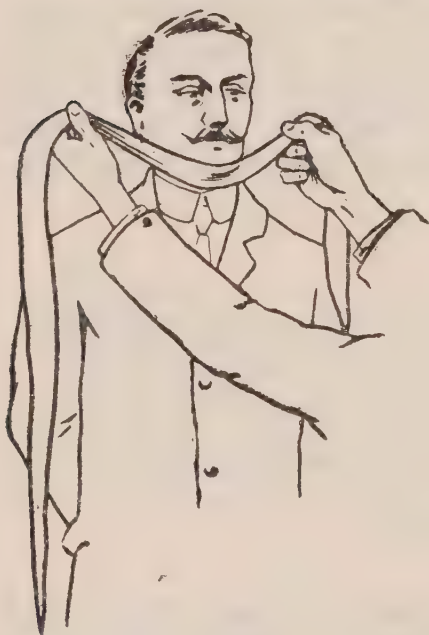


FIG. 72.

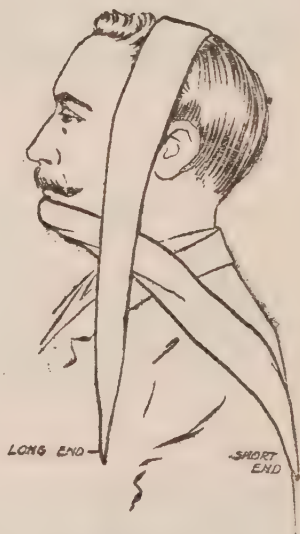


FIG. 73.

carry it round the front of the chin (fig. 74), complete the bandage by tying off both ends, at the side of the neck opposite the crossing (see fig. 75).



FIG. 74.



FIG. 75.

Fracture of the Shoulder Blade (Scapula).

Take a *broad fold bandage* and place the centre of it underneath the armpit of the injured side and carry one end up over the shoulder blade until it reaches the top of the shoulder on the *uninjured* side (see fig. 76), then carry the other end of the bandage up across the chest and cross both of these ends on the top of the uninjured shoulder, carrying one end down the back and one down the front of the shoulder, and tying them both off, either in the front or the back of the patient (see fig. 77). To finish this bandage apply the St. John arm sling (see fig. 78).

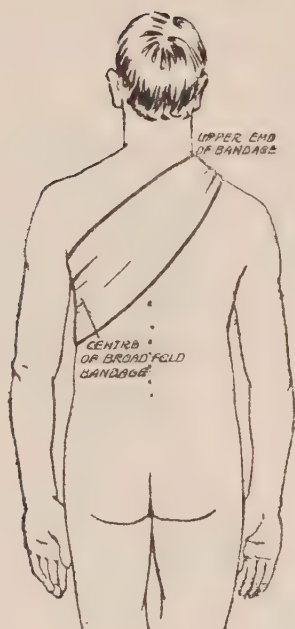


FIG. 76.



FIG. 77.



FIG. 78.

Bandage for a Fractured Collar Bone.

Place a *roll pad* underneath the injured armpit, then place the hand and forearm across the chest, and apply the St. John arm sling (see fig. 79). Now take a *broad fold bandage* and

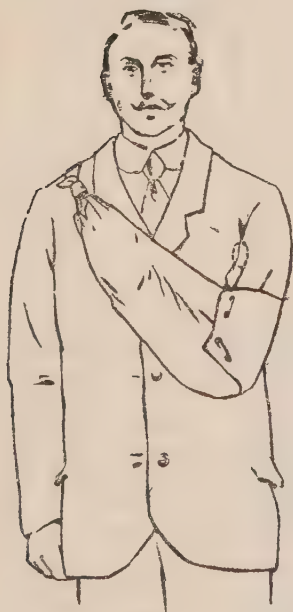


FIG. 79.

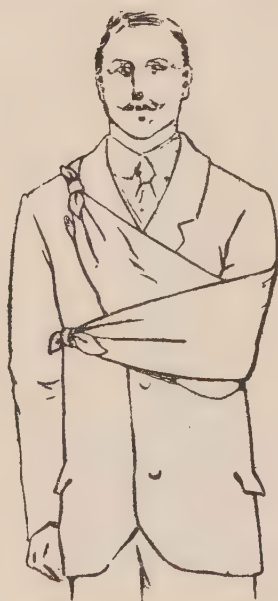


FIG. 80.

place the centre of it just above the elbow, carry one end round the back and one end round the front of the patient, and tie them both on the opposite side of the patient (see fig. 80).

Fracture of both Collar Bones (Clavicles).

FIG. 81.

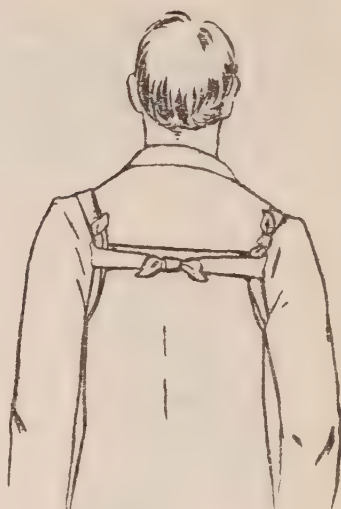


FIG. 82.

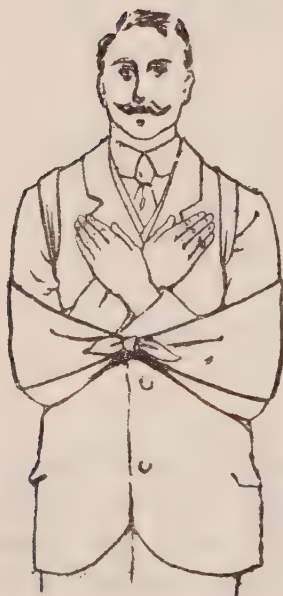


FIG. 83.

There are two methods by which this injury may be treated. We will take the following one first:

Method 1.—Pass a narrow fold bandage underneath each armpit and carry the ends over the top of the shoulders and tie them in a reef knot just at the back of the shoulder, so making a ring round each shoulder (see fig. 81). Then slip a narrow fold bandage through each of the rings at the back of the patient and tie the ends

off in the centre of the patient's back (see fig. 82). Now place the hands across the chest, place a broad fold bandage round both elbows and tie the ends off in a reef knot underneath the hands (see fig. 83).

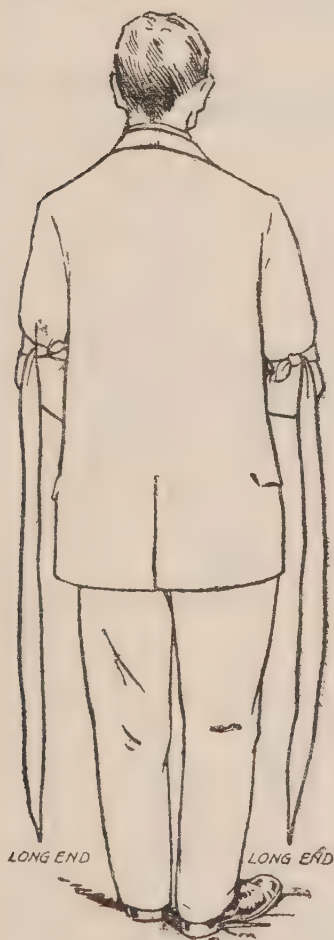


FIG. 84.



FIG. 85.

Method 2.—Take two narrow fold bandages and tie them to the patient's arms just above

the elbow, leaving two long ends (see fig. 84), then place the patient's hands across his chest, cross the long ends in the centre of the back, and carry them round the elbows, pulling them quite tightly, and tie them off just underneath the patient's hands (see fig. 85).

Bandage for a Fractured Arm-bone (Humerus) near the Shoulder.

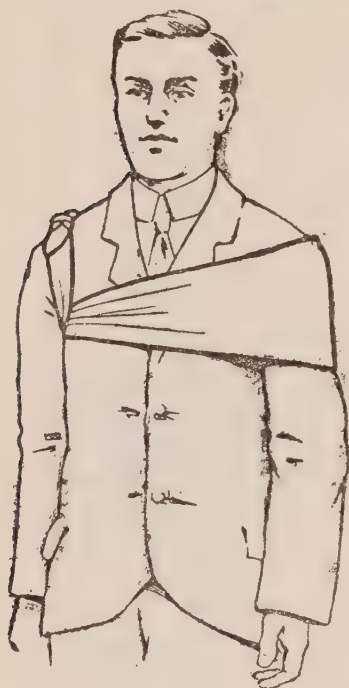


FIG. 86.



FIG. 87.

Splints cannot be used for this, as the fracture is so near the shoulder, therefore the treatment is as follows :

Take a *broad fold bandage* and place the centre of it right over the seat of the fracture,

carrying one end of the bandage across the patient's back, and the other across the chest, crossing then underneath the uninjured armpit, and carrying them up to the top of the shoulder and tying them off in a reef knot (see fig. 86). Then apply the small arm sling (fig. 87). If the injury is very painful then the knot of the sling must be tied off on the uninjured side (see fig. 88).



FIG. 88.

Bandage for a Fractured Arm-bone (Humerus in the Centre.

Take four small splints about six inches long and apply them to the arm in order to make a casing round the fracture, then take a narrow fold bandage and tie it round the splints above the fracture, and then apply another narrow fold bandage round the arm below the fracture (see fig. 89). Failing the splints two flexible exercise books could be used to make the casing (see fig. 90). To finish the bandage

support the hand and forearm in a *small arm sling* (see fig. 91).



FIG. 89.

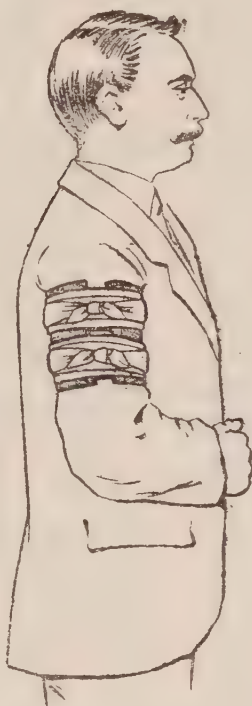


FIG. 90.

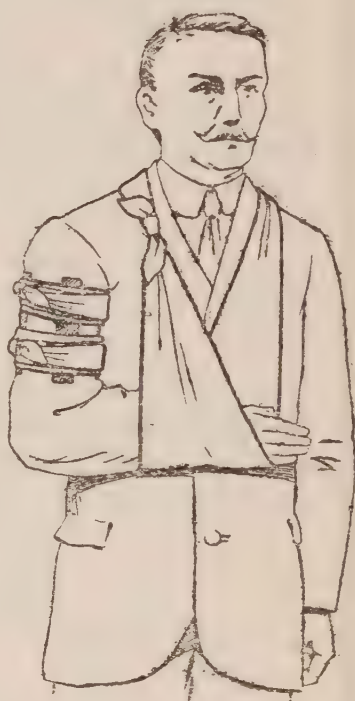


FIG. 91.

Bandage for an Injury to the Elbow, or a Fracture of the Humerus Bone, the Arm, or the Radial and Ulnar Bones of the Forearm near the Elbow.

First make an angular splint. To do this take one long splint, long enough to reach from just above the elbow to below the finger

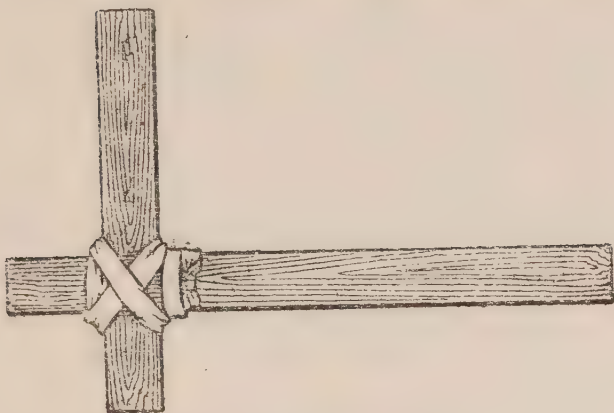


FIG. 92.



FIG. 93.



FIG. 94.

tips, and one small splint, long enough to reach from underneath the armpit to below the elbow and tie them together as shown in fig. 92. Now apply this splint to the flexed elbow on the inner side of the arm and forearm. Fix them in position by tying one narrow fold bandage round the arm above the elbow, one round the forearm below the elbow, and one round the hand and wrist (see fig. 93). Then apply a small arm sling (see fig. 94).

Bandage for a Fractured Forearm.



FIG. 95.



FIG. 96.

Flex the elbow, then apply a splint upon the inner side of the forearm (this splint must

protrude below the flexed elbow and the finger tips), also apply another splint upon the outer side of the forearm. Fix these splints by applying three narrow fold bandages: (1) Above the fracture; (2) below the fracture; (3) round the hand and wrist (see fig. 95). To finish the bandage apply a large arm sling (fig. 96).

Bandage for a Crushed Hand.

Take a padded splint, long enough to reach from above the finger tips to below the wrist, and apply it to the palm of the hand. Now

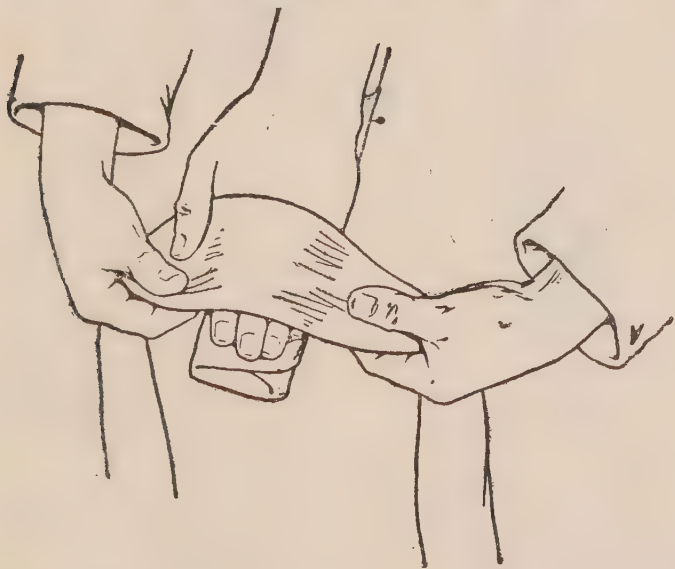


FIG. 97.

take the centre of a narrow fold bandage and place it over the fingers (see fig. 97), then carry the ends of the bandage and cross them over the splint, bring them underneath the hand, to

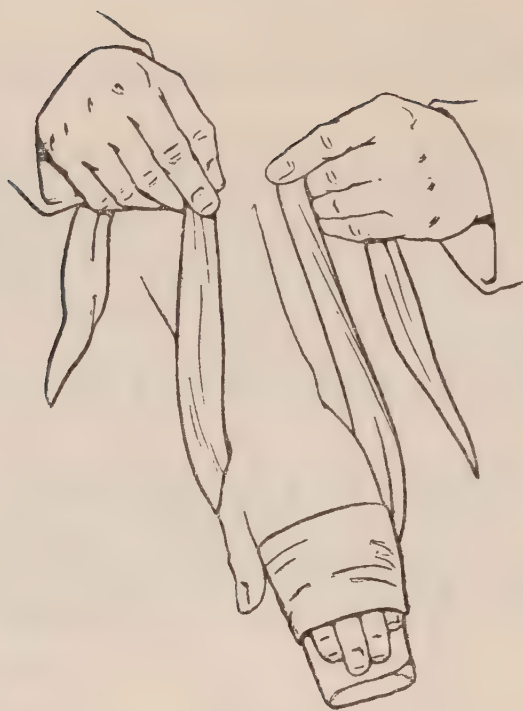


FIG. 98.



FIG. 99.

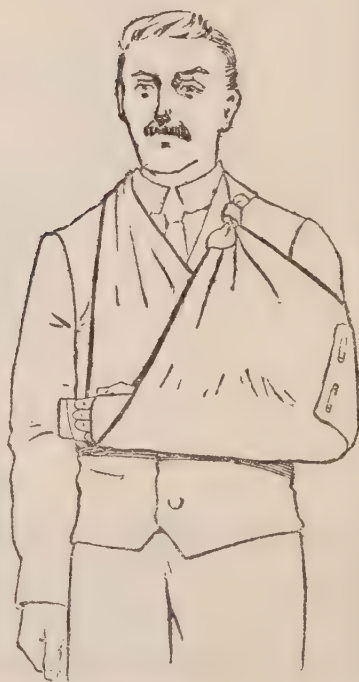


FIG. 100.

the back of the wrist (see fig. 98) and carry them round and round the wrist and splint tying them on the back of the wrist (fig. 99) Then apply a large arm sling (fig. 100).

To Pad a Splint.

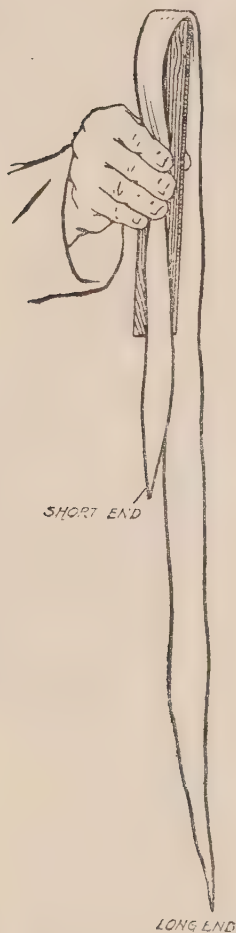


FIG. 101



FIG. 102.

Take a *narrow fold bandage* and place it over the top of a splint leaving one long end and

one short end (see fig. 101). Now take the long end and wind it round and round the splint from the top to the bottom and tie it off to the short end (see fig. 102).

Bandage for a Simple Fracture of the Ribs.

Take the centre of a broad fold bandage and place it over the injured rib; take one end round the back of the patient, and one end round the front, and tie them off on the



FIG. 103.

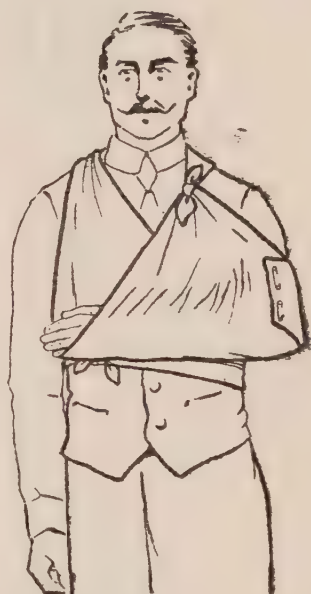


FIG. 104.

opposite side of the injury. This bandage should be tight enough to give the patient relief. Now apply another broad fold bandage over the previous one, covering two-thirds of

the bandage and leaving one-third showing, and tie it off underneath the knot of the other bandage (see fig. 103).

Then apply a *large arm sling* see (fig. 104).

Fractured Thigh Bone (Femur).

For this fracture you require seven bandages : three *broad fold* and four *narrow fold*. First of all tie both feet together in the following manner : Take a *narrow fold bandage* and

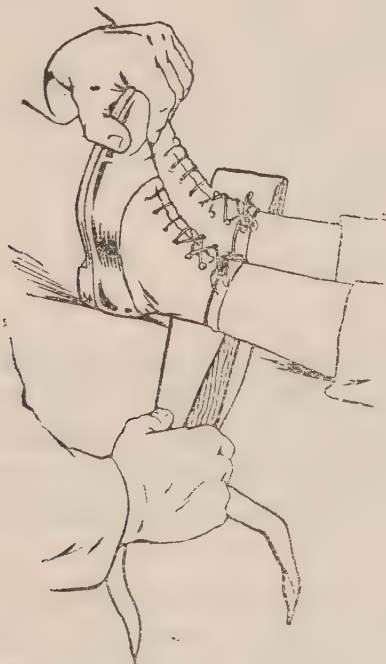


FIG. 105.

pass it underneath the ankles with the aid of a stick (see fig. 105). Then bring up the ends above the instep and cross them (see fig. 106),

now carry them round to the soles of the feet, and cross them once more, then the ends are again brought back to the top of the insteps and tied in a *reef knot* (see fig. 107).

Next obtain a splint long enough to reach from just below the armpit to below the foot, then take a *broad fold bandage* and pass it



FIG. 106.



FIG. 107.

under the *small* of the patient's back, and draw the ends up to the chest; at the same time pass one end over the patient's chest, and catch in the top of the splint, then tie off both ends on the splint in a *reef knot* (see fig. 108, No. 2).

Now take another *broad fold bandage*, and pass it under the top of the patient's thighs, then draw it gently up to the patient's hips, and carry one end of the bandage across the hips, and tie both the ends on the splint in a *reef knot* (see fig. 108, No. 3).

Then place a *narrow fold bandage* under-

neath the top of the patient's thighs, and draw it gently down to just above the seat of the fracture, tie off both ends on the splint in a *reef knot* (see fig. 108, No. 4).



FIG. 108.

Now take another *narrow fold* bandage and pass it underneath the patient's knees, gently draw the bandage up to just below the fracture and tie the ends off in a reef knot (see fig. 108, No. 5). Then take another narrow fold bandage and pass it underneath the patient's ankles, draw it gently up to the centre of the legs and tie the ends of the bandage off in a *reef knot* on the splint (see fig. 108, No. 6). The bandage round the feet can now be loosened, and a turn taken round the splint, when the bandage is tied up as before (see fig. 108, No. 1).

The last bandage is a *broad fold* which is passed over the knees and tied off on the splint in a *reef knot* (see fig. 108, No. 7). You will see by fig. 109 how the patient looks from the uninjured side.



FIG. 109.

Table Showing Position of Bandages.

- (1) Narrow fold round feet.
- (2) Broad fold across chest.
- (3) Broad fold across hips.
- (4) Narrow fold above fracture.
- (5) Narrow fold below fracture.
- (6) Narrow fold round legs.
- (7) Broad fold round knees.

The above method is the safest and, in my opinion, the easiest method of tying up a fractured thigh, and may be applied to either man, woman or child.

Fractured Knee-cap (Patella).

In the treatment of this fracture *four narrow fold* bandages are used.



FIG. 110.

Raise the limb and place it upon a bucket, or it may be placed upon the patient's own

foot (see fig. 110). Now obtain a splint long enough to reach from just below the patient's hips to below the foot and place it underneath the limb (see fig. 111). Then take a *narrow fold* bandage and place the centre of it on the top of the thigh in the centre, and gently draw it down until it reaches the kneecap, carry the ends of the bandage underneath the splint, cross them and bring them up below the kneecap and tie them off on the top of the leg (see fig. 112, No. 1).



FIG. 111.

To make this bandage firm, take another *narrow fold* bandage and place the centre of it on the top of the knot of the first bandage, carry the ends down underneath the splint, cross them and bring them up above the kneecap and tie them off in a *reef knot* (see fig. 112,

No. 2). Next take another *narrow fold* bandage and secure the splint to the foot in the following manner. Place the centre of it over the splint at the back of the ankle, bring the ends up to the top of the instep and cross them, carry them under the soles of the feet, crossing them once more, bring them to the back

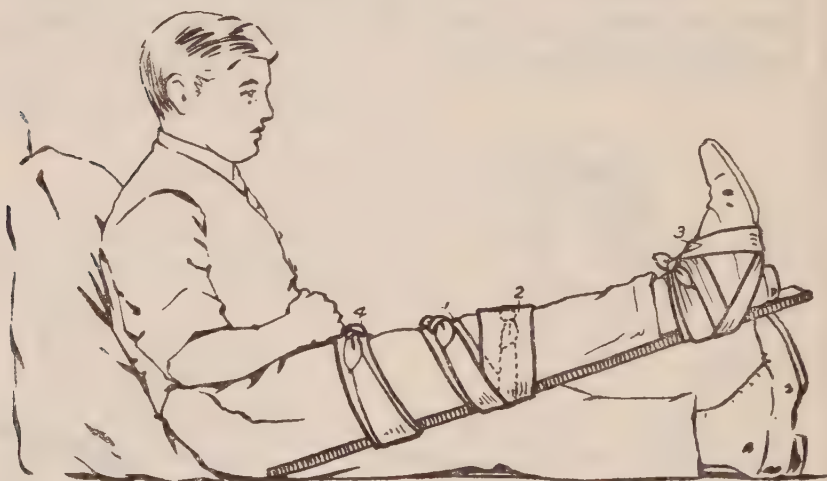


FIG. 112.

of the ankle, cross them again and carry them up to the instep, where they are tied off in a reef knot (see fig. 112, No. 3). The last *narrow fold* bandage is taken round the thigh and the splint and tied off on the top of the thigh in a reef knot (see fig. 112, No. 4). The patient's back may be supported in order to take the strain off the muscles, away from the fracture (see figs. 110, 111, 112).

Table for Bandages.

- (1) Above kneecap.
- (2) Below kneecap.
- (3) Round foot and splint.
- (4) Round thigh and splint.

Fractured Leg.

Four *narrow fold* bandages are required and one *broad fold*. Both feet must be tied together as in the case of the *fractured thigh bone* by a narrow fold bandage (see fig. 107.) Next obtain a splint long enough to reach from above the knee to below the feet.



FIG. 113.

Now take a *narrow fold bandage* and pass it underneath the knees, gently draw the ends down to just above the fracture and tie them off on the splint in a reef knot (see fig. 113, No. 2). Then pass another *narrow fold bandage* underneath the patient's ankles and draw the ends gently up to just below the fracture, and tie them off on the splint in a reef knot (see fig. 113, No. 3). Now take another narrow fold bandage and secure the splint to the thigh, as shown in fig. 113, No. 4. The

bandage round the feet may now be loosened, and a turn made round the splint, the ends are then tied up again (see fig. 113, No 1). Last of all a *broad fold* bandage is now passed round the knees and the ends tied off on the splint in a reef knot (see fig. 113, No. 5).



FIG. 114.

Figure 114 will show what the bandages look like from the uninjured side.

The above method is, in my opinion, the easiest and quickest way of treating a fracture of the leg, and may be used upon any man, woman, or child.

Table for Fractured Leg.

- (1) Narrow fold bandage ties feet together.
- (2) Narrow fold bandage above fracture.
- (3) Narrow fold bandage below fracture.
- (4) Narrow fold bandage above the knees.
- (5) Broad fold bandage round the knees.

Crushed Foot.

A splint must be used under the foot. It must be long enough to reach from above the toes to below the heel (see fig. 115). If the splint

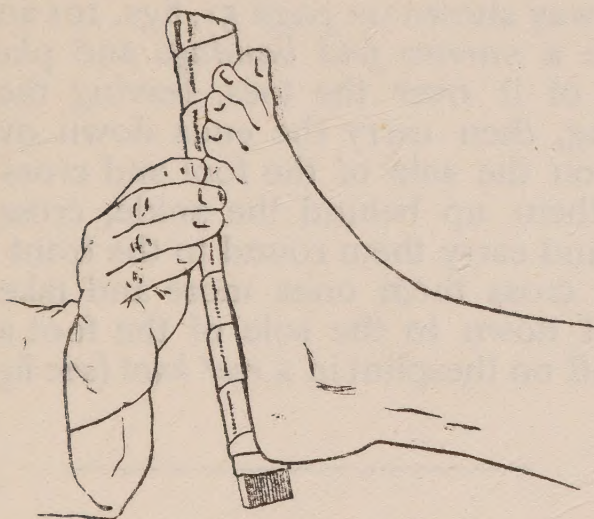


FIG. 115.

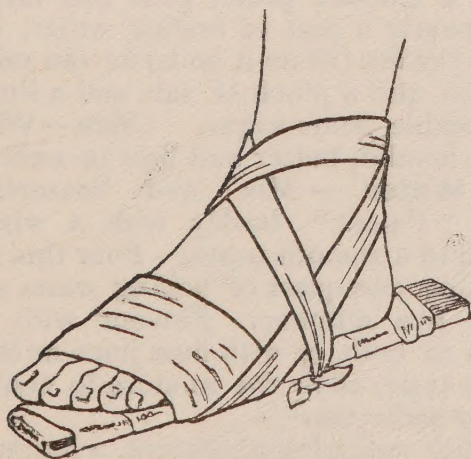


FIG. 116.

is applied next to the skin it must be padded in the way shown on page 51, figs. 101 and 102.

Take a *narrow fold bandage* and place the centre of it over the toes, leaving the nails showing, then carry the ends down over the splint on the sole of the foot and cross them, carry them up behind the ankle, cross them again and carry them round to the front of the instep, cross them once more and take them straight down to the sole of the foot and tie them off on the splint in a *reef knot* (see fig. 116).

Directions for using Robinson's "Patent" Groats.

Gruel.—Take of the "Patent" Groats one table spoonful, mix with a wineglassful of cold water, gradually added, into a smooth paste, pour this into a stewpan containing nearly a pint of boiling water, or milk, stir the gruel on the fire (while it boils) for ten minutes ; pour it into a basin, add a pinch of salt and a little butter, or if more agreeable, some sugar. (*Note.*—When Gruel is made for an invalid, butter had best be omitted.)

Barley Water.—Mix one dessertspoonful of Robinson's "Patent" Barley with a wineglassful of cold water into a smooth paste. Pour this into a stewpan containing one quart of boiling water and stir over the fire for five minutes. Flavour with lemon and sugar, either or both, or with lime juice or lemon squash according to taste, allow the mixture to cool, and strain off the barley sediment.

For invalids requiring nutriment, a larger quantity of barley should be used, and the straining of sediment omitted, or not, as directed by the doctor.

